

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | SHARON | 68903 | 012900 |
| O.I.P.E. CLASSIFIER | | 64914 | 2/18/23 |
| FORMALITY REVIEW | | 64924 | 2 2500 |
| RESPONSE FORMALITY REVIEW | | | 4 2600 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - Canceled
 + (Through numeral) Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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